## EXHIBIT 3

## 

	Participant mu	st provide all of the information below in English:
1.		ontact information, including email address, and that of its counsel,
Participant's	Name:	Ana I García Reyes
Participant's	Address:	HC-01 BOX 7130 Aguas Buenas PR 00703
Participant's	Email Address:	aigreyes a hotmail com
Name of Co		United States District Court, Clerk's Office
Address of	Counsel:	150 Ave Carlos Chardón Ste. 150 San Juan PR Do.
Email Addr	ess of Counsel:	puertorico into a primeclerk. com
2.	Participant's C	Claim number and the nature of Participant's Claim:
Claim Num	ber:	17 BK 3283 - LTS
An Print	James La ature a I Garcí Name	a Reyes
Title	(if Participant is	not an individual)
A	igust 11, 20	
Date	J	ce of Participation: If you are represented by counsel, this Notice with the Court on the docket using the CM/ECF docket event Notice